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Fill in this info	rmation to identify your coop						
Fill in this into	rmation to identify your case:			ieck one l 2A-1Supp		irected in this form and	in Form
Debtor 1	Miranda Monique Jackson			ZA TOUP	,. 		
Debtor 2 (Spouse, if filing)				■ 1. The	re is no pres	umption of abuse	
United States	Bankruptcy Court for the: Northern District o	f Mississippi		apı	olies will be n	o determine if a presunade under <i>Chapter 7</i>	
Case number					`	icial Form 122A-2).  does not apply now be	ecause of
				qua	alified military	service but it could ap	oply later.
044 1 1 1				☐ Chec	k if this is a	n amended filing	
	Form 122A - 1						
Chapter	7 Statement of Your Cur	rent Mor	nthly Inc	ome			12/15
attach a separa case number (i qualifying milit	and accurate as possible. If two married people a te sheet to this form. Include the line number to w known). If you believe that you are exempted fro ary service, complete and file Statement of Exemp alculate Your Current Monthly Income	hich the additior m a presumption	nal information a of abuse becau	applies. O ise you do	n the top of ai not have prir	ny additional pages, wri narily consumer debts o	te your name and or because of
1. What is	your marital and filing status? Check one or	ıly.					
■ Not r	narried. Fill out Column A, lines 2-11.						
	ed and your spouse is filing with you. Fill ou	ıt both Columns	A and B, lines	2-11.			
☐ Marri	ed and your spouse is NOT filing with you.	You and your s	spouse are:				
☐ Liv	ring in the same household and are not lega	Ily separated.	Fill out both Co	lumns A	and B, lines 2	2-11.	
ре	ring separately or are legally separated. Fill or enalty of perjury that you and your spouse are looking apart for reasons that do not include evadir	egally separated	d under nonbar	nkruptcy la	aw that applie	es or that you and you	
101(10A). For the 6 months	verage monthly income that you received from all or example, if you are filing on September 15, the 6-m s, add the income for all 6 months and divide the total on the same rental property, put the income from that p	onth period would by 6. Fill in the res	be March 1 throsult. Do not include	ugh Augus de any inco	t 31. If the amo	ount of your monthly incor ore than once. For examp	ne varied during ble, if both
				Column Debtor		Column B Debtor 2 or non-filing spouse	
	<ol><li>Your gross wages, salary, tips, bonuses, overtime, and commissions (before al payroll deductions).</li></ol>				3,171.68	\$	
	3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.			0.00	\$		
of you of from an and roor	unts from any source which are regularly pa or your dependents, including child support. unmarried partner, members of your household nmates. Include regular contributions from a sp Do not include payments you listed on line 3.	Include regular I, your depender	contributions nts, parents,	\$	375.00	\$	
5. Net inco	ome from operating a business, profession,	or farm					
			otor 1				
	ceipts (before all deductions)	\$ <u>0.00</u> -\$ 0.00					
_	and necessary operating expenses		Copy here ->	. \$	0.00	\$	
	thly income from a business, profession, or fart ome from rental and other real property	n \$	Copy liere ->	Ψ		Ψ	
6. Net inco	one nom remai and other real property	Deb	tor 1				
Gross re	ceipts (before all deductions)	\$ 0.00					
	and necessary operating expenses	-\$ 0.00					
	thly income from rental or other real property	\$ 0.00	Copy here ->	•\$	0.00	\$	
7. Interest	, dividends, and royalties			\$	0.00	\$	

Official Form 122A-1

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Debtor 1 Miranda Monique Jackson Page 2 of 3

Case number (if known)

					Column A Debtor 1		Column B Debtor 2 or non-filing s	pouse	
8.	Unemployment compensation			\$	S	0.00	\$		-
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	nt received was a benefi	t under	r					
	For you S	\$0.0	00						
	For your spouse	\$							
	<b>Pension or retirement income.</b> Do not include any a benefit under the Social Security Act.			\$	S	0.00	\$		
10.	Income from all other sources not listed above. Sp Do not include any benefits received under the Social received as a victim of a war crime, a crime against hudomestic terrorism. If necessary, list other sources on total below.	Security Act or payment imanity, or international	ts or						
	•			\$	·	0.00	\$		
				\$	<u> </u>	0.00	\$		
	Total amounts from separate pages, if any.		+	. \$	S	0.00	\$		
11.	Calculate your total current monthly income. Add li each column. Then add the total for Column A to the total		\$	3,	546.68	+ \$		= \$	3,546.68
									current monthly
Part	2: Determine Whether the Means Test Applies	to You						incom	e
12.	Calculate your current monthly income for the yea	r. Follow these steps:							
	12a. Copy your total current monthly income from line	11			Сору	line 11 h	ere=>	\$	3,546.68
	Multiply by 12 (the number of months in a year)							<b>X</b>	12
									42,560.16
	12b. The result is your annual income for this part of the	ne form					12b.	\$	42,300.10
13.	Calculate the median family income that applies to	you. Follow these step	s:						
	Fill in the state in which you live.	MS							
	Fill in the number of people in your household.	2							
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the ban	o online using the link sp				e instruct	13. ions	\$	51,577.00
14.	How do the lines compare?								
	14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, <i>There is no presumption of abuse.</i> Go to Part 3.								
	14b.  Line 12b is more than line 13. On the top of page 1, check box 2, <i>The presumption of abuse is determined by Form 122A-2</i> .  Go to Part 3 and fill out Form 122A-2.								
Part	3: Sign Below								
	By signing here, I declare under penalty of perjur	y that the information or	this st	tate	ment and ir	n any atta	chments is tru	e and c	orrect.
	X /s/ Miranda Monique Jackson								
	Miranda Monique Jackson								
	Signature of Debtor 1								
	Date March 1, 2019 MM / DD / YYYY								
If you checked line 14a, do NOT fill out or file Form 122A-2.									
If you checked line 14b, fill out Form 122A-2 and file it with this form.									

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Debtor 1 Miranda Monique Jackson

Case number (if known)

## **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 09/01/2018 to 02/28/2019.

### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Shelby County Government

Income by Month:

6 Months Ago:	09/2018	\$3,169.52
5 Months Ago:	10/2018	\$3,169.52
4 Months Ago:	11/2018	\$3,045.99
3 Months Ago:	12/2018	\$3,215.02
2 Months Ago:	01/2019	\$3,215.02
Last Month:	02/2019	\$3,215.02
	Average per month:	\$3,171.68

## Line 4 - Child support income (including foster care and disability)

Source of Income: **Child Support** Constant income of **\$375.00** per month.